

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90224 045 \*\*\*150.00

**DOCUMENT # P98000048170**

1. Entity Name  
VISTA PROPERTIES RENTALS AND SALES, INC.



Principal Place of Business  
100 VISTA ROYALE BOULEVARD  
VERO BEACH, FL 32962

Mailing Address  
100 VISTA ROYALE BOULEVARD  
VERO BEACH, FL 32962

00000400



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03092006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number  
65-0838523

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME KURTZ, JOHN C  
STREET ADDRESS 100 VISTA ROYALE BOULEVARD  
CITY-ST-ZIP VERO BEACH, FL 32962 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE CD  
NAME SOLLINS, CHARLES D  
STREET ADDRESS 6300 PARK OF COMMERCE BLVD  
CITY-ST-ZIP BOCA RATON, FL 33487 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V  
NAME KOEHLER, KIRK W  
STREET ADDRESS 100 VISTA ROYALE BLVD.  
CITY-ST-ZIP VERO BEACH, FL ☐ Delete

TITLE  
NAME ☐ Change ☒ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD  
NAME FRIEDRICHSEN, JOHN B  
STREET ADDRESS 1140 BAY STREET  
CITY-ST-ZIP TORONTO, ON M5S2B4 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD  
NAME COOKE, DOUGLAS G  
STREET ADDRESS 1140 BAY STREET  
CITY-ST-ZIP TORONTO, ON M5S2B4 ☐ Delete

TITLE Treasurer  
NAME Douglas Cooke  
STREET ADDRESS 1140 Bay St  
CITY-ST-ZIP Toronto, ON M5S 2B4 ☒ Change ☐ Addition

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/06

Date

772-562-9031

Daytime Phone #